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Bib Data Sheet

CONFIRMATION NO. 4594

<b>SERIAL NUMBER</b> 10/056,774	<b>FILING OR 371(c) DATE</b> 01/24/2002 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 1416.35US01
<b>APPLICANTS</b> William R. Holmberg, New Richmond, WI; Mario Osvaldo Vrandecic Peredo, Belo Horizonte, BRAZIL;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/25/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 50
Verified and Acknowledged	Examiner's Signature _____ Initials _____			<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> 22865				
<b>TITLE</b> Conduit for aorta or pulmonary artery replacement				
<b>FILING FEE RECEIVED</b> 2120	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	